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**TRANSMITTAL** 

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PTO/SB/21 (6-99)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

10/622,092

July 16, 2003

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Filing Date

**Application Number** 

FORM		First Named Inventor	Joseph Rubinfeld							
(to be used for all correspondence after	initial filing)	Group/Art Unit	1623							
		Examiner Name	Unassigned							
Total Number of Pages in This Submission	9	Attorney Docket Number	12636-331							
ENCLOSURES (check all that apply)										
Fee Transmittal Form		ment Papers (pplication)	After Allowance Communication to Group							
Fee Attached	Declara	tion	Appeal Communication to Board of Appeals and Interferences							
Amendment / Response	Licensin	ng-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)							
After Final		Routing Slip (PTO/SB/69) companying Petition	Proprietary Information							
Uersion with Markings Showing Changes	Petition	to Convert to a onal Application	Status Letter							
Affidavits/declaration(s)	Power o	of Attorney By Assignee	Additional Enclosure(s) (please identify below):							
Extension of Time Request	Termina	al Disclaimer	Notice to file missing parts of nonprovisional application							
Information Disclosure Statement	Small E	ntity Statement								
Certified Copy of Priority Document(s)	Request	for Refund								
Response to Missing Parts/ Incomplete Application	Remarks									
Response to Missing Parts under 37 CFR 1.52 or 1.53										
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT										
Firm or Individual name U.P. Peter Eng, Reg. No. 39,666 WILSON SONSINI GOODRICH & ROSATI										
Signature Mmin In (1)										
Date December 29, 2003 Customer Number: 021971										
CERTIFICATE OF EXPRESS MAILING										
I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated below and addressed to: Commissioner for Patents, Washington, D.C. 20231, on this date: 12/29/2003.  [Express Mail Label EV 333499006 US]										
Typed or printed name Donna L. Heng	gst									
Signature		-enas	December 29, 2003							
Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC										

20231.

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FEE	TR	AN	SM	ITI	[AL
	for	FY	200	03	

Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(\$)1,954.00

Complete if Known					
Application Number	10/622,092				
Filing Date	July 16, 2003				
First Named Inventor	Joseph Rubinfeld				
Examiner Name	Unassigned				
Group/Art Unit	1623				
Attorney Docket Number	12636-331				

101/107/100 (\$)1,754.00						12030-331								
METHOD OF PAYMENT (check one)						FEE CALCULATION (continued)								
1. The Commissioner is hereby authorized to charge indicated fees				es 3. A	3. ADDITIONAL FEES									
and credit any over payments to:  Deposit Account Number  23-2415 (Docket No. 12636-331)					Large Fee Code	Entity Fee (\$)	•	Entity Fee (\$)	Fee Description			Fee Paid		
Deposit						105	130	205	65	Surcharge - late filing fee or oath			130.00	
Account Wilson Sonsini Goodrich & Rosati					127	50	227	25	Surcharg or cover					
Name					139	130	139	130		lish specification	ŀ			
Charge Any Additional Fee Required				147	2,520	147	2,520	For filing	g a request for ree	examination				
Under 37 CFR §§ 1.16 and 1.17						112	920	* 112	920*		ng publication of	SIR prior to	<del></del>	
2. Payment Enclosed:						113	1,840	* 113	1,840*	Examiner action Requesting publication of SIR after Examiner action				
	] Chec	k 🔲 N	Aoney Or	rder	Othe	r	115	110	215	55	Extension for reply within first month			
	FEE CALCULATION						116	420	216	210	Extension for reply within second month			420.00
1. BASIC		FEE			· ·		117	950	217	475	Extension for reply within third month			
~	Entity Fee	Small Fee	Entity Fee	Fee D	Description	Fee Pai	d 118	1,480	218	740	Extension month	n for reply withir	fourth	
Code	(\$)	Code	(\$)				128	2,010	228	1,005		n for reply withir	fifth	
	770	201	385	Utility	filing fee	770.00	119	330	219	165	Notice of	Appeal		
106	340	206	170	Design	filing fee		120	330	220	165	Filing a b	orief in support of	f an appeal	
107	530	207	265	Plant f	iling fee		121	290	221	145	Request	for oral hearing		
108	770	208	385	Reissu	e filing fee		138	1,510	138	1,510	Petition to proceeding	o institute a publ	ic use	
114	160	214	80	fee	onal filing		140	110	240	55	Ī	o revive - unavoi	dable	
<u>,_</u>		SU	BTOTAL	· (1)	(\$)	770.00	141	1,330	241	665	Petition to revive - unintentional			<del></del>
2. EXTRA	CLAIM	FEES	Extra Cla		Fee from below	Fee Paid	142	1,330	242	665	Utility is	sue fee (or reissu	e)	<del></del>
Total Claims	53	-20** =	33	<u> </u>	18.00	= 594.00		480	243	240	Design is	ssue fee		
Independent Claims	1	-3**=		] x [		= 0	144	640	244	320	Plant issi	ıe fee		
Multiple Depe	endent					= 0	122	130	122	130	Petitions	to the Commissi	oner	
**or number previously paid, if greater; For Reissues, see below					123	50	123	50	Petitions related to provisional applications					
_	Entity Fee	Small Fee	Entity Fee		Fee Descri	ption	126	180	126	180	Submissi	on of Information	n Disclosure	_
Code 103	( <b>\$</b> ) 18	Code 203	( <b>\$</b> )	Claims	in excess of	20	581				Stmt	1		
102	86							40	581	40		g each patent ass (times number of		40.00
		202	43	maepen	uent claims	in excess of	3 146	770	246	385		ubmission after f (37 CFR 1.129(a		
104	290	204	145	Multiple paid	dependent	claim, if not	149	770	249	385	For each	additional invent	ion to be	
109	86	209	43	**Reissue independent claims over original patent			Other fee	(specify	·)	,	examined (37 CFR 1.129(b))			
110 18 210 9 **Reissue claims in excess of					Other fee	Other fee (specify) 55/110 Terminal Disclaimer								
	SUB	TOTAL (	(2)		(\$)594.00		* Reduce	d by Bas	sic Filing Fo	ee Paid	S	SUBTOTAL (3)	)	\$590.00
SUBMITTE	D BY	-										Complete (i)	(applicable)	
Name (Print/1	Гуре)	U.P. Pet	ter Eng	·			Registration		39,666			Telephone	650-493	_9300
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Date

(Attorney/Agent)

39,666

December 29, 2003

**Telephone** 

Customer No. 021971

650-493-9300

Signature